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ABSTRACT

Presented is the final report of the New York Regional Direction Service (NYRDS) which provides referral services to handicapped youth and their families. Individual sections address the five program components: development and maintenance of an agency and service information base (which includes activities directed toward compiling and maintaining information on service availability in the NYRDS area); development and maintenance of client service information (which includes assessment of client needs, identification of service gaps, maintenance of client files and records, coordination of services, and followup of clients and services); advisory services (which include the involvement of consumer, advocacy groups, community organization associations, advisory boards, and others); outreach services (which include public awareness activities); and administration (which includes activities related to costs, staff development, management, and efforts not readily assigned to one or more of the preceding areas). (SBH)

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4 ordering contact

The Graduate School and University Center
of the City University of New York

CASE: New York Regional Direction Service
Regional Resource Center (RRC #10)
144 West 125 Street, New York, N.Y. 10027 Telephone: 212/860-6166

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NEW YORK REGIONAL DIRECTION SERVICE

FINAL REPORT

(February 1, 1976 to September 30, 1977)

TO: Dr. Norman D. Howe
Program Education Specialist
BEH/USOE/DHEW

Ms. Marie Roane
Project Officer
BEH/USOE/DHEW

Mr. Martin Hayott
Principal Investigator
N.Y.R.D.S.

FROM: W.J. Roye
Director
N.Y.R.D.S.

RE: N.Y. Regional Direction Service
OEC-0-74-7895

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY

Wendell J. Roye

Dir. NYRDS

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Staff During The Demonstration Period

Wendell J. Roye, Director
Philip R. Deppe, Associate Director

Evelyn L. Bridges
Rhonda Calhoun
Carmen Carino
Philip R. Deppe
Justine Finch
Frank Graves
Denise Guadalupe
John Halbreich
Ernestine High
Tirzah Irizarry
Shirley King
Mark Mishken
Nisel Orona
Joan F. Pearl
Carmen Rios
Renee' Roberts
Samuel Robinson
Alma Rodriguez
Wendell J. Roye
Rosalind Tennyson

* *Several indivuals were not employed for entire period.*

REGIONAL DIRECTION SERVICE

The City University of New York
144 West 125th Street, New York, New York, 10027
(212)860-6166

The Regional Direction Service (R.D.S.) is a branch of the New York Regional Resource Center for the education of the handicapped. R.D.S. provides direction services to handicapped youth and their families in an area bounded by 110 Street to 155 Street from the East River to the Hudson River in Manhattan.

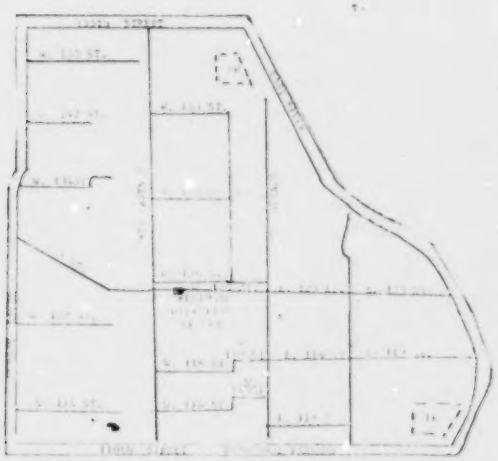
Help families receive optimum services for handicapped children within the service area. To do this R.D.S. will help clients cope with the confusion often associated with locating and receiving services, facilitating referrals with cooperating agencies in the community, educating families as to where the services are, and to better understand the nature of disabilities and abilities of the children involved.

Our services include:

-locating appropriate agencies
-referral information
-locating transportation services to the schools, medical services, and recreation facilities.

R.D.S. requires only that a child be 3 to 21 years of age, handicapped, that the family live within the service area, and parents or guardians, consent to the service.

There is no fees for our services.



NEW YORK REGIONAL DIRECTION SERVICE was funded as a Demonstration project by Bureau of Education for the Handicapped, DHEW, Office of Education, from February 1, 1976 to September 30, 1977. The Service reached a significant realization after twenty months of demonstrating the Direction Service Concept, promoting replication of the program, and helping client families and handicapped children navigate the forest of agencies and services in a sensitive and volatile catchment area. New York Regional Direction Service reached "Final Report Time" and encountered the same optimism and confidence with which the staff began, still convinced that in calloused New York City there is a striving public service force and a complex of educators, medical and social service personnel with the determination, improvisional skills, and the heart to deliver services to the handicapped with unflagging optimism and professional commitment.

Reviewing twenty months, so as to compile a final report which reflects the span and complexity of the Direction Service Concept, indicates that the program rested upon a viable and practical concept, and helped answer a critical need.

Reviewing calls, contacts, services, improvisations, and seemingly limitless needs and countless problems, reminded us that agencies and people respond to the special needs of handicapped children pursuing their educational opportunities and options with an extraordinary sense of cooperation and energy. No agency or service, or responsible individual employed by any of the hundreds of organizations involved during the NYRDS demonstration period could be found which was not truly doing the best it, and he or she, could.

For easy reading, this report is organized into five elements (Program Components). These are the same elements as earlier NYRDS monthly and quarterly reports to the Project Officer. This format has made it easier to explain and describe Direction Service to cooperating agency personnel, and also to groups considering replication and adaptation of the concept to other areas. As a Demonstration Project, facile description, continuous assessment, and adjustment of programatic activities, with apt description and sound rational, was an unchanging objective throughout the demonstration period.

The five major sections in this report evidence some overlap. Some blurring around the edges is obvious and inescapable, and proved healthy. However, stated and reported separately for concept clarity, accountability, and planning purposed, program reporting components consisted of the following:

NEW YORK REGIONAL DIRECTION SERVICE

PROGRAM COMPONENTS

I. Development and Maintenance of Agency and Service Information Base includes: Activities directed toward compiling and maintaining information on service availability in the N.Y.R.D.S. service area.

II. Development and Maintenance of Client Service Information includes: Assessment of client needs, identification of service gaps, maintenance of client files and records, coordination of service and follow-up of clients and services.

III. Advisory: includes the involvement of consumer, advocacy groups, community organization associations, advisory boards, etc. All activities which assist N.Y.R.D.S. in needs, identification, future planning and useful data on the service area.

IV. Outreach: includes activities which expand NYRDS public awareness capacity and outreach activities.

V. Administration: includes activities related to costs, staff development, management, and efforts not readily assigned to one or more of the preceding areas. Administration also includes Documentation of the model and replication planning.

COMPONENT #1. DEVELOPMENT AND MAINTENANCE OF AGENCY AND SERVICE INFORMATION BASE

includes: Activities related to compiling and maintaining information on Service availability in the R.D.S. service area.

Since its inception, the New York Regional Direction Service has placed particular emphasis on the development of detailed, accurate and reliable data about the availability and effectiveness of service provided by existing agencies to handicapped youths and their families in the Northern Manhattan catchment area.

This effort is an important attempt to improve service delivery to those in need of them, and to assist the agencies that provide services to perform their functions more efficiently and with greater likelihood of success.

For if prospective clients do not know where to go or what to do to seek relief for a medical, social or educational problem, or even where to look for information about services potentially available to them, their ability to cope, or sometimes survive, not to mention overcome the difficulties they are expecting, may be seriously impaired.

Existing service agencies, on the other hand, have not been sufficiently well-known, or visible in their communities, and the services they are to provide are consequently underused. Or they may have been overburdened with requests for services they are not properly equipped to provide, resulting in a lessening of efficiency in their ability to carry out their primary functions.

There is a clear need, therefore, for the continuous development of a comprehensive information base about the nature and scope of services provided by existing agencies, to benefit both the agencies and their potential clients.

Hence, the production of such an information base is a multi-sided effort to improve service delivery, serving to enhance the activities of groups and agencies charged with the relief treatment of handicapped youths and their families, and to insure that the services are effectively received, and delivered.

By informing, orienting, mobilizing and positively affecting individuals or groups within these constituencies, R.D.S. has fulfilled its role as a "mediating structure" in a human service delivery system.

The tasks performed in this component represent an orderly broadening and extension of goals pursued by N.Y. R.D.S. since its inception. They are reflections of the experience gained by N.Y.R.D.S. since it began operating, and the feedback from both clients and agencies it has served.

R.D.S. has found that service agencies are often as needy as the clients and their families-- in terms of "Direction Service" and of coordination and focusing of efforts.

By interposing itself between clients and agencies, and furnishing to both much-needed information about the availability, nature and extent of existing services, R.D.S. brought about significant improvement in the service delivery system.

This component, for the operational period reported here, became essentially a two-pronged function. The first function was to collect, analyse and catalogue detailed information about service agency characteristics within the catchment area and to use and disseminate that information as widely as possible. To this end the R.D.S. staff is constantly searching, recording, and contacting agencies as they become known to the agency. This activity resulted in locating, identifying and contacting ±276 separate agencies during the reporting period.

The second function became to deepen the relationship with key service providers into an actual collaborative approach to providing appropriate and efficient service to R.D.S. clients. To a great extent this becomes a time consuming activity wherein R.D.S. staff must personally visit, recruit and maintain on-going contact with persons in each of the agencies, otherwise the in-need R.D.S. client when approaching the service may be relegated to the already long "waiting" line of clients. This "waiting" line in some instances, and not uncommon in this area, is a three to four month period from referral to service provision or placement. Following are the 36 agencies with whom this project formed and has maintained on-going collaborative relationships during this year.

September, 1976 - Children's Village
Northside Center for Child Development
Morningside Children's Center

October, 1976 - Education Institute for Learning and Research
Community Service Society
N.Y.U. Institute for Rehabilitative Medicine

October 1976	-	N.Y.U. Special Care Clinic Children's House
November, 1976	-	Social Services of Development and Evaluating Clinic, Sydenham Hospital N.Y.C. Health Department - Speech and Hearing Center Health Service Agency, New York City Center for Multiple Handicapped Children (N.Y.C.B.O.E.)
December, 1976	-	"Find Me", N.Y.C.B.O.E. Child Find Project
January, 1977	-	Wiltwick School, Manhattanville Branch Health Service Agency, Central Harlem Committee Sight and Save Program, Harlem Hospital Hearing and Speech Center, Harlem Hospital The New York League for the Hard of Hearing Community Life Day Care Center Children's Committee, Central Harlem Mental Health and Mental Retardation Board
February, 1977	-	Harlem Dowling Children's Service Department of Corrections, Riker's Island Salem Day Care Center Mini Academy, C.C.N.Y. - Y.M.C.A.
March, 1977	-	Community Council of Greater New York The Psychological Center, The City College of New York Community Participation and Education Program
April, 1977	-	The Children's Art Carnival The Baldwin School The Walden School Project Reach, Department of Parks and Recreation, N.Y.C.
May, 1977	-	Evaluation and Placement Unit, Manhattan West, N.Y.C.B.O.E. Health Conservation Classes, District 5 N.Y.C.B.O.E. Readiness Program for Children with Learning Disabilities, N.Y.C.B.O.E., Teacher's College, Columbia University

June, 1977 - Children with Retarded Mental Development Programs, Districts 3,4,5,6, N.Y.C.B.O.E.
Sheltering Arms Children's Center

The following list of agencies has been utilized by N.Y.R.D.S. in service delivery for more than a year. This listing of 70 N.Y.R.D.S. cooperating agencies has been categorized by type of service delivery for the reader's convenience.

AGENCIES FOR RETARDED CHILDREN

1. Shield's Institute for Retarded Children
2. Association for Help of Retarded Children
3. Harlem Team for Self-Help, Inc.
4. Chama - Child Development Center
5. Children's Aide Society
6. Community Participation Education Program, Inc.
7. Institute for Mentally Retarded

CEREBRAL PALSY

1. United Cerebral Palsy of New York

COUNSELING

1. Harlem Interfaith Counseling Service
2. James Weldon Johnson Center

DEAF

1. La Salle
2. Lexington School

EMOTIONALLY DISTURBED

1. Riverside Church

EPILEPSY

1. Epilepsy Foundation of Greater New York Chapter

GROUP HOMES

1. Goodwill Industries
2. New York Department of Mental Hygiene
3. Abbot House
4. Harlem - Dowling Services
5. Sheltering Arms Children Services

HEALTH SERVICES

1. Massive Economic Neighborhood Development: Family Planning

HOME CARE SERVICES

1. Visiting Nurse Service of New York
2. Mt. Sinai Hospital
3. Lincoln Hospital
4. Harlem Hospital
5. Retarded Infants Services, Inc.
6. Association for Children with Retarded Mental Development
7. Catholic Charities

INCOME MAINTENANCE

1. Human Resources Administration, Dept. of Income Maintenance

PRE-SCHOOL PROGRAMS

1. Addie Mae Collins Community Service
2. Champ
3. Riverside
4. Samuel's Temple

REFERRAL & INFORMATION

1. Mayor's Office of the Handicapped

SCHOLARSHIPS

1. League in Aide of Crippled Children

SHELTER WORKSHOPS FOR RETARDED

1. Mend - Workshop and Pre-Workshop
2. Young Adult Institute
3. Altro Workshops, Inc.
4. Care
5. Federation of Training Guidance

SPECIAL SCHOOL PROGRAMS

1. Board of Education, Division of Special Education and Pupil Personnel Services
2. Massive Economic Neighborhood Development School
3. Community Life Head Start's Preparatory Screening Educational and Referral Service
4. Community Participation Education Program

VOCATIONAL REHABILITATION

1. Massive Economic Neighborhood Development: Vocational Opportunity
2. Opportunities Industrialization Center of New York
3. N.Y. State Office of Vocational Rehabilitation
4. Path Finders
5. Federation for the Handicapped
6. Just One Break
7. Governor's Committee for Employment of Handicapped
8. N.Y. City Department of Social Services - Human Resources Administration

HOSPITALS

1. New York City Mental Health and Mental Retardation and Alcoholism
2. East Harlem Health Center
3. Manhattan Hostel, New York State Department of Mental Hygiene
   Metropolitan Placement Unit
4. Health and Hospital Corporation, City of New York
5. Washington Heights - West Harlem Inwood Mental Health Center
6. Columbia Presbyterian
7. Brookdale Dental Center of New York University
8. New York Medical College Retardation Institute
9. St. Lukes Hospital
10. Development Evaluation Unit (Sydenham Hospital)
11. Institute of Rehabilitation Medicine, New York University
    Medical Center

MISCELLANEOUS

Youth Diversion Project (Court)
Association of Black Social Workers

Also during the spring of this reporting period, the N.Y.R.D.S. took upon itself, because of numerous requests within the catchment area, the task of locating, describing, and contacting summer programs for handicapped children.

The task involved finding residential and day programs for handicapped children within the N.Y.R.D.S. catchment area. Meetings were held with Director, Doris Mason, American Camping Association, a circulation and advertisement worker with the New York Times, and a social worker from the Community Council of Greater New York. Information obtained from these sources exposed and directed the counselor towards funding agencies, settlement houses, recreational facilities and other agencies that service the handicapped.

Combining this information and evaluations of residential camps from the N.Y. Regional Resource Center gave the N.Y.R.D.S. staff some initial direction. What was found after some 75 telephone calls to churches, private agencies, the N.Y.C. Board of Education, Health Department and Social Service Departments within and outside of the N.Y.R.D.S. area was the lack of money allocated for summer programs. Many programs contacted were unable to give specific information about summer camps, because they did not know if funding would be available. Residential camps were found to be greater in number, as compared to day programs for handicapped children.

The larger percentage of residential summer facilities contacted cost more than the families within the N.Y. R.D.S. area could afford. A small number of residential camps could afford a sliding scale fee schedule, with a small number offering free camping. Day camps for the handicapped are hard to find in N.Y.C. Along with the residential camps, most day camps were set up for the mentally retarded population, leaving in their wake the other handicapping conditions the N.Y.R.D.S. is concerned with. Private schools in Manhattan that work with handicapped children other than the Mentally Retarded, were found to offer some programs. Their fees ranging from $500 to $1,800 for an eight week session excluded most children from the Harlem area. After this extensive effort, only three residential day camps were located and listed that would accept N.Y.R.D.S. children.

This Component, with all its tasks consumed approximately 5,035 staff hours or 17 % of total agency effort.

TRANSPORTATION AGENCIES PROVIDING SERVICES
TO THE HANDICAPPED

(Within RDS Catchment area as of May 16, 1977)

1. Alfa Invalid Coaches
49-27 69th Street
Woodside, N.Y.
335-2036
Freedie

2. Bomeg Corporation
229-31 East 120th Street
New York
798-5380
Ms. Sylvestri

3. Caravan Minibus Carriers
4902 Kings Highway
Brooklyn, New York
258-5565

4. Cerebral Palsy Of N.Y.C.
122 East 23rd Street
New York, New York
677-7400
Mr. Kearns or Mrs. Lichtman

5. Holmes Ambulette
4957 Flatbush Avenue
Brooklyn, New York
287-3170
Jerry Ellis

6. J & J Transportation
Brooklyn, New York
266-7660
Mr. Cronin

7. Jiffy Ambulette Inc.
36-43 Bell Blvd.
Bayside, New York, New York 11361
428-5832
Lenny Blaustein

8. L & S. & D. Transporation Serv., Inc.
2542 W. 13th Street
Brooklyn, New York 11223
226-6911 or 226-9400
Sal Abend

9. Medi Cab
152-24 Northern Blvd.
Flushing, New York 11354

10. Milton's Tra[illegible]rtation Service Inc.
686 E. 219th Street (near White Plain
Bronx, New York 10467
Mr. Mayo

11. New York Ambulette
55 Audubon Avenue
New York, New York
WA 7-8300
Mr. O'Connor or Mr. O'Sullivan

12. Reliable Ambulette Service
803 233rd Street
Bronx, New York
994-3882
Joe Fishman

13. River Bros Ambulette Service
198-21 Hollis Avenue
Hollis, Queens, New York
Ms. Hardnette or Mr. Rivers

14. Tri County Ambulette Service Inc.
245 Dyckman Street
New York , New York
942-9682
Ask for Leo

COMPONENT #2. CONTINUED DEVELOPMENT MAINTENANCE AND DOCUMENTATION OF CLIENT INFORMATION AND SERVICE PROGRAM.
Includes: Assessment of client needs, identification of service gaps, maintenance of client files and records, coordination of service and follow-up of clients and services.

Since it began operating early in 1976, one of the central concerns of R.D.S. was, and continues to be, the public's difficulty in locating and using available social, medical and educational services. The problem is compounded when the potential clients of the service agencies belong to minority and/or low income groups. And compounded further still when these clients are handicapped youths, and they or their families are in need of a variety of services. For them, the difficulties in seeking and obtaining assistance have proven almost insurmountable. Experience gained by R.D.S. in the past seventeen months, which confirms yet again finding such as these described in the RAND report*, shows some of the more common difficulties encountered by potential clients to be:

- - Lack of information about available services
- - Lack of access to needed services
- - Lack of power of discrimination about the wide assortment of possible service providers
- - Lack of resolve in seeking services for which they are entitled.

Unwittingly, the service agencies are themselves adding to the problem, as we have discovered when:

- - Available services are not equitably distributed among "rich" and "poor" areas of the R.D.S. Service area.
- - Available services are highly specialized in terms of handicap dealt with, age range of potential clients served, and the like

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*Improving Services to Handicapped Children, James Kakalik et al. Prepared for the Department of Health, Education and Welfare, May 1974

- - Overwork and understaffing within given agencies reduces the quality of service that can be rendered
- - A lack of coordination between existing agencies results in a duplication of services, gaps in available services, etc...

Under these circumstances, the need for a "Direction Service" becomes clear, its function being:

- - To provide a one-stop access to information about the social, medical and educational services available to handicapped youths and their families
- - To help educate handicapped youths and their families about available services and how to assess their eficacy
- - To provide professional linkage and support to the handicapped, their families and the agencies serving them, so that all may benefit.

For the clients we have served, these efforts can, in a very real sense, be life-saving. For beyond the immediate relief of having their needs matched to the agency or agencies best able to meet them (and this, in itself, is often a considerable achievement) R.D.S. has played a vital role in helping the handicapped and especially their families face, accept and even surmount their handicaps as they plan their lives better, and hence are able to live more fully. For service agencies R.D.S. has continued to provide non-threatening, practical assistance, facilitating and coordinating their efforts, alleviating their case-load of clients who do not match the services they offer, helping them to acquire greater visibility and acceptance within the communities they serve, and improving their public image. Finally, in a larger sense, the operating experience R.D.S. is gaining is providing a fully developed model of a "mediating structure" between clients and agencies, with the model presently being replicated by public service agencies. This component, therefore, accounts for all tasks which will directly assist handicapped youths and their families. These tasks include:

- - Receiving clients and determining their service needs
- - Providing clients with the detailed information for service delivery required to meet their needs
- - Coordinating and facilitating service delivery between

clients and appropriate agencies

- - Following up on service delivery to clients
- - Continuing to develop and maintain comprehensive records regarding available services and the means of matching these services for the specific needs of clients
- - Developing the information needed for the future replication and permanent installation of the R.D.S. model within existing public service agencies.

This component in a twelve month operational period from July 1, 1976 to August 1, 1977, directly served 139 handicapped youths and their families. Service from this activity consumed a total of approximately 6,251 hours of staff time or 25% of the total staff effort. (See Table #1 and #2 for summaries)

There is particular difficulty in describing prototypic service in this component as there truly is no "typical" case. While it is a simple matter to record mathematical manipulations to service delivery counts --each client requires an average of 14 telephone calls to complete service access-- this in no way depicts the uniqueness or range of requirements particular cases place on the R.D.S. delivery system staff. With the mean hours devoted to each client being 36.5 hours and the median being 39 hours, there would seem to be a fairly limited range; however, such is not the case. The range, 3 hours to 120 hours of time devoted to past clients more clearly depicts the wide diversity of problems and corresponding effort expended in delivering services to the 139 individual clients.

TABLE #1

MONTHLY SUMMARY OF CLIENT SERVICE

	NEW CLIENTS RECEIVED	HEALTH/MEDICAL SCREENINGS ARRANGED FOR	PERSONAL CASE CONFERENCES	TELEPHONE CONTACTS/CONFERENCES
AUGUST	0		7	132
SEPTEMBER	5		18	145
OCTOBER	11		36	154
NOVEMBER	13		42	165
DECEMBER	14	START SERVICE	51	178
JANUARY 1977	10	31	27	182
FEBRUARY	4	42	32	176
MARCH	19	14	67	158
APRIL	17	3	61	180
MAY	5	6	27	178
JUNE	20	4	34	156
JULY	21	5	48	154
TOTALS	139	105	450	1,958
AVG. @ MONTH	11.58	15	34.50	163.16

TABLE #2

REGIONAL DIRECTION SERVICE

SUMMARY CLIENT REPORT

As of August 1, 1977

Mentally Retarded	9
Developmentally Retarded	5
Hearing Impaired	8
Speech Impaired	4
Communicative Disorders	0
Visually Handicapped	4
Emotionally Disturbed	8
Physically Impaired	3
Neurologically Impaired	7
Other Health Impaired	2
Undiagnosed Handicap	47
Multiple Handicap	10
Children referred by: Board of Education, Evaluation & Placement Unit Division of Special Education & Pupil Personnel Services	32
TOTAL	139*

*includes 22 new clients for the month of July, 1977

Numbers of this nature do not reflect the unique and particular pervasions isolated during the past service period:

- - a family of seven, with five handicapped children of school age, none of whom were in school, or receiving services of any kind.

- - the numbers of newly arrived, non-english speaking clients who are not aware of the services, and once aware, have extreme difficulty gaining access and/or maintaing contact with service agencies. (This is also compounded by the extreme illegal alien problem in this city.)

- - obvious misuse of diagnostic instrumentation, the use of discriminatory testing practices, and placement of clients according to "slots" in classes as opposed to the clients' prevailing handicapping condition.

- - numbers of handicapped individuals coming to R.D.S. for needed service, yet being beyond the mandated age range, (see Case #3 following).

- - clients within holding patterns of a service agency for years but receiving no service from the agency and unable to go to a more responsive agency as Agency B cannot begin until Agency A completes its work or officially disengages the client and Agency A will not disengage the client--they need the caseload.

to name but a few!

To further illustrate the magnitude of demands there has been included in this report summaries of service to three persons requesting assistance from this R.D.S. These cases only ground and give the reader a glimpse of the service and concern generated on behalf of these particular clients. While Case #1 is a case this service would like to call routine, it is in fact probably one of the less involved. Case #2, while seeming to be one in which a great deal of effort was expended, is not the one in which 120 hours of staff time was utilized. Case #3, while expressing a definite need for human concern, could not be officially counted. Yet as quickly as this agency could we offered direction to the specified need.

Finally then, the reporting of Component #2 activities becomes not so much a situation in which one can record numbers of actions taken, or service units delivered, but rather a demonstration of the level of concern expended in the delivery of a human service.

CASE #1

The Central Harlem Neighborhood Board, a Community Board, referred a family to the New York Regional Direction Service. After writing the family, the father met with a counselor in the N.Y. R.D.S. office and home visits were conducted. The child in need of services is a seven year old boy who lives with his three year old sister, mother and father. The boy has not been out of the house for more than infrequent hospital visits and periodic walks. The child was not known to the school district before a letter to the principal of the school in his district was sent by N.Y.R.D.S. Because of the lack of socialization by peer interaction, the child has a minimal understanding of life beyond the windows. He has deficit in motor skills, needs support when walking, and is primarily echolalic. A complete evaluation has been completed at a neighborhood Developmental Clinic, and records are centralized at the New York Regional Direction Service. The boy has been placed in a community based education program with speech and motor development included in his curriculum. His sister is presently enrolled and attending a day care center affiliated with a near by church. The counselor also directed and helped the mother and father with Medicaid, Social Security Insurance, and Welfare forms. The family has been granted public assistance. The educational commitment by the mother and father is now apparent and a stronger family bond and interest is more prevailing.

CASE #2

September, 1976. This case begins evaluation and diagnostic testi at Syndenham Hospital Developmental Center on November 3. Through the Syndenham testing program a complete overview of the family will be possible. The Counselor on the case has met with the parent and son, alone and together, in the office, and at their home. Maintenance of files and records has been an on-going process.

During this process it must be noted that school records for this child cannot be found, while attendance at the three city schools was recognized. The case has been reviewed during staff meetings.

November, 1976. The Counselor assigned to the case met with Ms. Gillery of the Bureau of Child Welfare (BCW). The Bureau closed their case concerning our client, after their documentation of child abuse and neglect was collected. BCW will now send their information to Albany, the child remains in the same environment.

December, 1976. Mr. Swartzfarb, Principal, and Mrs. Goldstein, Guidance Counselor of the school the client attends, met with N.Y.R.D.S. Counselor. The N.Y.R.D.S. Counselor enlightened both the Principal and Guidance Counselor on the problems the child has had at previous schools attended as described by the mother, and his problems at home. Because there was no past records existing, little academic interaction was possible. The teacher spoke to the Counselor and expressed her incapacity to work with the child, and could not recommend other classes for remediation.

The work-up at a Neighborhood Developmental Center is being done, with appointments being kept by the mother and child. Due to lack of past academic information, present school standing and slow work-up, the child remains in a large "normal" public school class (37 children) unable to function to his potential. Suspension from the school for a period of five days, due to "behavior problems" is now on the Principal's desk.

The N.Y.R.D.S. Counselor is trying to gather information about classes available and residential school placements for the child, while contact with the family is on-going on a weekly basis.

This one case has consumed an estimated 72 hours of a Counselor's time. The possibility that this may be indicative of the demands for each properly tracked case, causes wide-spread apprehension.

January, 1977. The fourth month for this case, and it has shown minimal forward movement. Due to crowded conditions in the evaluation center, completion of the workup is slated for the beginning of April! During this period the child has been submitted to frustrating conditions in the school, which presumably has led to him being expelled. The school the child attends has not made arrangements for alternative methods for education, and the child remains at home.

April, 1977. After nine months this case, the child completed evaluation and workup at the Developmental Evaluation Unit, Syndenham Hospital. Recommendations and records from the hospital are being sent to the Evaluation and Placement Center. The Bureau for Child Welfare has been contacted so that money for residential placement of the child may be allocated.

CASE #3

Regional Direction Service also received a referral from a Mrs. Amela Daniels, Director, called us seeking Direction Services for a sixty-five old alcoholic handicapped confused woman who needed housekeeping services. As Mrs. Daniels described the problem she apologized for calling us knowing our age limit. A relative of the sixty-five.year old called R.D.S. An appointment was made and relative was seen and Direction given as follows: Relative wanted to have power of attorney to handle patient's affairs. She was already handling the patient's affairs.

The patient had a diagnosis of chronic brain syndrom with seizures and diabetes, and is a "sneaky" drinker. Relative has to tell tenants in the building where they live not to give her alcohol or lend her any money. The sixty-five year old has set several fires in the building and sneaks out and falls and hurts herself, making it dangerous for her to live alone.

Mrs. Keiths is a cousin to the patient and lives upstairs over her with her two children and fifteen month old grandchild.

A letter from physician at Arthur Memorial stated that the patient was considered psychotic and she was confused, disoriented etc. Patient is a retired cleaning woman with Board of Education. She receives $274.00 per month Social Security. She also receives $135.00 per month retirement pension. She has medicare. The cousin has to do all the cleaning, cooking, and trying to supervise patient, which she describes as more difficult than taking care of her fifteen month old baby. Patient sneaks out, buys liquor and calls to say she has fallen and hurt herself.

The Direction requested by the cousin were the following: (1) She wanted to be made the Home Health Aide-Housekeeper for patient and be paid for same. The problem is that no agency will hire a relative. The cousin is under treatment for arthritis, asthma, and hypertension with chronic headaches which are becoming more progressive and severe. On making referral Mrs. Daniels of Sobriety Unlimited was under the impression that patient was living alone, but there is someone living with patient nights, however, patient does not get along with this person.

The concerned relative was directed to: (1) Office; (2) Office and phone number. She has an appointment for January 21, 1977; (3) She was also directed to SSI to find out what the procedure is for becoming a housekeeper. The Social Worker, Mr. Wilterspoon, at Logan Hospital was contacted and suggested he consider setting a 90-day nursing home stay for patient, as the cousin is under the clinic care and may have to be hospitalized. This would give patient a chance to dry out. Nursing homes do not accept drinking patients. It was suggested that the physician rewrite the diagnosis in such a way as to make it possible for a nursing home to take patient. Mrs. Keiths has been to Social Security and the patient's checks will be made out to her. Patient loses a key every week and the locks on the doors to her apartment have to be changed. Mrs. Keith's next appointment is February 21, 1977.

COMPONENT 3: ADVISORY

Includes involvement of consumer, advocacy groups, association, advisory boards, etc. All activities which assist NYRDS in needs, identification, future planning and useful data on the service area.

The NYRDS approach to the advisory function early in the project was to gather specific information when going out to organizations active in servicing handicapped youngsters in the catchment area. While involved in outreach visits and interviews on agency sites, the project staff would solicit advice as to what knowledgeable consumers and service providers viewed as high priority problems for handicapped clients.

In this manner the advice -sometimes complaint, was specific and targeted. For example, a frequent response concerned the degree of difficulty many low income families experience in trying to "get to" services because of the high cost of transportation (from $2-4 dollars per 15 block travel). This cumbersome and expensive reality spawned within the NYRDS a willingness to 1) participate in the client's travel expenses, and 2) go into the field to a client's home to facilitate the data gathering and discussion phase of service delivery. Consumers attending public meetings, which NYRDS staff attended and made presentations, have continued to vocalize a concern for problems handicapped people have with transportation in an area populated largely by relatively low-income people.

During the last nine months of project life the general advisory questions have been deleted from the project presentations. This phase resulted in a list of respected and long standing service providers in the area who had a noted stance of being committed to solutions. These committed professionals became a standing commission to whom the project would go for insight, collaboration, and feedback concerning the needs and operations of community resources and our potential plans for service delivery. These discussions where most often on a one-to-one basis in which the specifics of presenting concern the project brought were discussed, whether it was about a specific client and his needs or the development of methodological approach to a certain large agency. Only once during this last phase of operation was this entire group brought together for a single event -an open house in the NYRDS project site.

One of the consistent strategies brought to the service by many members of their group was that the best advisory feedback function available to this project would be to place our staff members on the three or four key service commission boards which operate in this area. And as they were able, our constituent advisers recommended our placement on the following commissions:

- Health Systems Agency, Central Harlem Board.
- Planning and Development subcommitte, Health Services Administration (NYC).
- New York Association of Black Social Workers.
- Harlem Catchment and Subcommittee on Child and Adolescent Services.
- New York City Department of Mental Health and Mental Retardation Services, Harlem Board.

Having participated within these structures for over six months, has indeed eased our access to other services and given this project not only a greater visibility but a much wider scope out of which to proceed with our service delivery.

Following is a partial but representative list of people who have offered their experience and expertise to this project in an advisory capacity (at no cost to the project).

Mr. Reginal Williams, Director, Harlem Educational Program
Mr. Norman Montague, Executive Director, Morningside Parents Association
Ms. Andrea Jackson, Executive Assistant to the Commissioner, Agency for Child Development
Ms. Eula Hodges, member, Neighborhood Board #2
Mr. Arnold Sininious, member, Neighborhood Board #1
Dr. Gary Brewer, USOE/BEH consultant
Dr. Virginia Wilkenson, Chief of Child Psychiatry, Harlem Hospital
Tariq Abdur-Rahim, Manhattan Borough Director, New York City Health Systems Agency

Participating with these individuals and the expertise they represent has indeed been helpful to the project. Many potential pitfalls were avoided because of heeding the advice of more experienced professionals committed to the advancement of service to the handicapped in our catchment area.

The Advisory portion of our effort consumed 15% of total staff time (4,303 man hours) and as such should, in this start-up and project establishment period, be combined with the 22% effort in Component #4 Outreach, for a total of 37%. While this may seem extensive in the first glimpse, the reader must consider that one of the predominant problems in this catchment area is first of all gaining visibility in the eyes of the consumer, and secondly securing the trust of both provider and client that a single agency will provide a care service of the kind mandated by the Direction Service concept.

POLITICAL BOUNDARIES AND ELECTED OFFICIALS
IN REGIONAL DIRECTION CENTER CATCHMENT AREA

Borough President: Percy C. Sutton (R-D-L)

Part of two U.S. Congressional Districts. Representatives:

19. Charles B. Rangel (R-D-L)
55 West 125th Street
New York, New York 10027

20. Bella S. Abzug (D-L)
252 7th Avenue
New York, New York 10001

Part of three State Senatorial Districts. Representatives:

28. Carl McCall (D-L)
State Office Building
163 West 125th Street
New York, New York 10027

29. Franz S. Leichter (D)
656 West 181st Street
New York, New York 10033

30. Robert Garcia (D-L)
514 East 138th Street
Bronx, New York 10454

Part of four State Assembly Districts. Assembly Persons:

70. Marie M. Runyon
163 West 125th Street
New York, New York 10027

71. George W. Miller (D)
State Office Building
163 West 125th Street
New York, New York 10027

72. Angelo Del Toro (D)
129 East 106th Street
New York, New York 10029

74. Herman D. Farrell, Jr. (D)
3785 Broadway
New York, New York 10032

Part of four New York City Council Districts. Council Persons:

4. Theodore S. Weiss (D-L)
City Council, City Hall
New York, New York 10007

5. Frederick E. Samuel (D-L)
2315 Adam C. Powell Blvd.
New York, New York 10030

6. David B. Friedland (D)
4149 Broadway
New York, New York 10033

8. Louis R. Gigante (D)
2260 First Avenue
New York, New York 10035

COMPONENT 4: OUTREACH

Includes: Activities which expand N.Y.R.D.S. public awareness capacity and outreach activities.

Within the first six months of establishing the initial program it became clear to the staff of the N.Y.R.D.S. that great attention must be paid to the area of OUTREACH. Within the catchment area alone there are over 200 separate service providers and a network of alert and sensitive community organizations, all with a manifest concern for the area. By combining the Component 1 activities reported above and consistently maintaining conversation with these agencies, this agency was able to instate itself in approximately 50% of the service population as an agency which could be counted to assist in the delivery of service. Component 1 became the mechanism whereby the availability of services was identified and updated and Component 4: Outreach became the mechanism for maintaining contact visibility when the service agency was not in our active referral pattern.

The past operational period saw the N.Y.R.D.S. forming active collaborative relationships with 106 of the 276 identified agencies (38%), and an information loop with another 126 agencies (45%). Experience taught us however that what was first perceived as a necessary activity for a start-up period of nine months quickly surfaced as an ongoing function for the contract period. To maintain in the minds of the following potential referral sources the image of an agency which can and will be of assistance to handicapped persons in their need to gain awareness and access to services appropriate to their needs, is indeed a task requiring a great deal of effort.

17 Pre-school sites
250 Churches
5 Neighborhood Boards (+6 officers each)
4 Hospitals with Pediatric Service
43 Schools (Principals, guidance, teachers)
3 School district offices
17 N.Y.C. Board of Education Special Service Sites
97 Service agencies (not counted above)

or a contact list of 657 individual potential referral generating points.

With the passage of the recent federal legislation concerning services and more particularly the rights and responsibilities of the handicapped and service providers, there has been an expressed concern among service providers in this catchment area of forming interlocking patterns of service.

However, while the imperative is evident the constraints (perceived or real) of due process and confidentiality are constricting the flow of information concerning individual cases.

Within our service area there are a wide variety of agencies (federal, state, city, and private), serving only handicapped children. In addition to these numerous organizations devoted to remediation of particular handicaps, many other agencies offer related services to families in need: child guidance centers, mental-health clinics, pre-schools, hospitals, professional organizations, parent's and neighborhood organizations, N.Y. State Agencies (Department of Education, Mental Hygiene, Health, Social Services, Child Welfare, etc.) N.Y. City Agencies (Board of Education, Health Services Administration, Hospital Corporations, Mayor's Office for the Handicapped, etc.) Almost to any agency, the setting of structures in agreement with legislative mandates and compliance procedures have taken a great deal of time and concern. For instance, the N.Y.C. Board of Education, in the period from February through June 1977, went through five major policy revisions as to the proper authority and basis of responsibility for referral, evaluation, recommended placement, parental contact within the process (by whom and at what point in the process), agreement as to recommended placement, securing an educational placement, and placement of children. These revisions shifted major responsibilities of nine separate subsections of the N.Y.C.B.O.E. and in some cases instated, cancelled and reinstated single sub-sections three to four times in the period stated above. As the major task of the NYRDS project was to keep lines of communication and referral open during this time, one can begin to understand the complexity of the task in the light of the constant shifting of responsibility that took place.

Within this mix of activity NYRDS was able to clearly identify three overarching problems and address them in the following manner in its outreach effort:

A. Non-congruency of Jurisdiction - borders of agency jurisdiction, either socially, legally or just geographically, overlap and leave service gaps. These jurisdictions must be understood and not challenged by the NYRDS staff. It is the task of the staff to articulate these lines to clients and to utilize them to the best interest of their clients.

B. Agency Fears of Rivarly - programs already in business of providing service have openly resented an agency which by its very nature is attempting to develop a comprehensive service package for a client. The issue here is not only a proprietary sense towards one's own client but also a fear that "another" new program on the scene may be either

in business to ultimately supplant their service or may be evaluating their present service. Staff members are trained to be constantly aware of this feeling and its ramifications and must therefore reassure agencies of the continuing need for and validity of their service.

C. Confidentiality - is a major issue. As laws become more specific, parents more knowledgeable and sensitive, agencies become more fearful of legal consequences of improperly sharing data. Staff members therefore always proceeded with caution in this area, and moved not only on accurate understanding of the law but with the explicit knowledge and permission of the parent or legal guardian, and continuously reminded the cooperating agencies that the sharing of information must be zealously correct from a legal standpoint.

In this period, it was found helpful to identify and personally visit each agency providing service and in cooperation with a designated member of their staff to fill out a COOPERATING AGENCY DATA SHEET. This format not only allowed staff to circulate NYRDS Brochures, or Data Sheets, and discuss the Direction Service Concept, but also to establish a personal contact within each agency to whom staff could return for further cooperation. These contacted individuals, if not contacted because of client's service needs were kept informed of NYRDS activity by mailings and telephone conversations. This kind of personal contact became extremely beneficial when, perhaps six months after the initial contact, the NYRDS had a specific request to make.

The activity of this component consumed approximately 6,356 staff hours of time (22% of total staff effort) and an estimated 2,500 telephone calls, 322 staff visits to Service Sites, and the distribution of 1400 sets of project literature.

Community and Minority Newsletters Carrying
New York Regional Direction Service Notices

Amsterdam News
2340 8th Avenue
749-5300
Ms. Bennett

El Diario (Spanish)
181 Hudson Street
966-5040
Gilbert Feeitas
Cesar Virnet

Daily Challenge
350 5th Avenue
Walter Jackson

Heights & Valley News
250 West 106th Street
662-5852
Bruce Bailey

Chinese News Agency
350 5th Avenue (Chinese)
695-4456

Community Radio Stations Carrying
New York Regional Direction Service Information

WADO (Spanish)
205 East 42nd Street
983-8826
Mr. Feliciano

WLIB (A.M.) WBLS (F.M.)
801 2nd Avenue
725-4500

WRVR (F.M.)
85 Claremont Avenue
678-6855
Roberta Attman
Robin Zachary

New York City Housing Authority Tenant Association Newsletters
Carrying New York Regional Direction Service Information

Projects in NYRDS Area

Clinton Houses — *749 D.U.*
1744 Lexington Avenue
876-5205
Ms. Kover, Manager

Wagner Houses — *2162 D.U.*
2396 First Avenue
832-6688
Mr. Johnson, Manager

Grant Houses — *1940 D.U.*
1320 Amsterdam Avenue
666-4301
Mrs. Bouldin

Lincoln Houses — *1286 D.U.*
60 East 135th Street
234-0005
Mr. Underwood

Drew-Hamilton Houses — *1217 D.U.*
210 West 144th Street
861-2500
Mr. Jones, Manager

Martin Luther King Jr. Towers — *1379 D.U.*
90 Lenox Avenue
534-5100
Mr. Coates, Manager

Manhattanville Houses — *1272 D.U.*
549 West 126th Street
234-4200
Mr. White, Manager

Total Families Reached: *10,005*

D.U. = Dwelling Units (apartments)

Church Newsletters and Bulletins Carrying
New York Regional Direction Service Information

Metropolitan Baptist Church
151 West 128th Street

St. Luke's Episcopal Church
Convent Avenue & 141st Street

Riverside Church
Riverside Drive & 122nd Street

Canaan Baptist Church
132 West 116th Street

Metropolitian A.M.E. Church
58-66 West 135th Street

St. Thomas Apostole Church
262 West 118th Street

St. Phillips Episcopal Church
208 West 134th Street

Abyssinian Baptist Church
132 West 138th Street

Convent Avenue Baptist Church
420 West 145th Street

Estimate: NYKDS message reached a minimum of 12,000 families via local chruch publications.

SERVICE EVENTS SPONSORED BY R.D.S.

DATE	EVENT
May 20 & 21, 1976	OPEN HOUSE #1 Cooperating Agency Feedback Session #1
November 8, 1976	Public School #125 - "Early Identification of Handicapping Conditions", workshop for parents
January 1977	Manhattanville Community Center - Auditory and Speech Screening
February 1977	Manhattanville Community Center - Auditory and Speech Screening
March 1977	Manhattanville Community Center - Auditory and Speech Screening
June 1977	Harlem Hospital/CUNY Mini-Academy - Vision Screening
June 18 & 25, 1977	CHAMP Day Care Center 4 workshops "The Handicapped Child in the Family: From Awareness to Reality and Planning": I Learn and Discuss the Warning Signs II Diagnosis III Resources IV Attitudes and Reality
June 27, 1977	OPEN HOUSE #2 Cooperating Agency Feedback Session #2
September 8, 1977	CHAMP Day Care Center - "Mainstreaming the Handicapped Child", workshop for educational staff

MATERIALS DISSEMINATED IN OUTREACH EFFORTS

	Number Distributed
New York Regional Direction Service Flyer (English)	715
New York Regional Direction Service Flyer (Spanish)	540
New York Regional Direction Service Pamphlets:	
1. Helping The Preschool Child Learn to Speak Distinctly	1360
2. Helping The Preschool Child Who "Stutters"	325
3. Stimulating Speech and Language Development Of The Pre-school Child	360
4. Suggestions For Dealing With The Problems For The Visually Handicapped Pre-school Child	410
5. Helping The Pre-school Child Who Has A Hearing Loss	350
Poster	50
Your Child's Right to an Education SED, OECHE, April 1977	135
Directory of Camp Facilities For Mentally Retarded Children And Adults	95
Directory Of Transportation Companies	85
New York Regional Direction Service Summer Camp List	430

COMPONENT 5: ADMINISTRATION

Includes activities related to costs, staff development, management, and efforts not readily assigned to one or more of the preceding areas. Administration also includes Documentation of the model and replication planning.

While Component 5: Administration, contains the specific areas of administrative activity and concern: Replication of model; Staff Development; Reporting and Accountability; Evaluation; and other concerns, it should be recognized that the administrative staff necessarily played a direct leadership role in all components. The N.Y.R.D.S. staff relationships and management style were designed to be tightly knit, active across the wide range of activities, and highly interactive. A comprehensive, one-stop, information access and referral Direction Service had no published prototype experiences from which to draw other than our own and that of other simultaneously developing centers in establishing and operating the New York Regional Direction Service. It was possible in the early stages to project all the possible problems which surfaced and continue to surface, but the present reported experience of this center has allowed us to address the express needs of the area more effectively. The operation of a Regional Direction Service for handicapped youth in this specified area presented a unique and continuing challenge to service organizations and public education institutions throughout the demonstration area. The N.Y.R.D.S. demonstrated the feasibility of good planning, humane interaction, building collaborative interaction, and interagency cooperation in an area which on one hand is dominated by agency territorial concerns and on the other hand a lack of client access because of the immense size and activity of the agencies designed to serve. Through its own organizational operation and it's observable stance, the N.Y.R.D.S. continued to show that the Direction Service Concept is feasible, operationally sound, and a replicable model (at the city and state level) which yielded multiple service benefits to the handicapped youths and their families in the service area. All start-up activity was completed, staff has become experienced, and system modified by experience and extensive field testing are in place within the present N.Y.R.D.S. The N.Y.R.D.S. is recognized by it's experience and planning as a colleague in the task of service delivery by other service agencies. And as such the N.Y.R.D.S. has been called upon to share it's expertise and developmental capacity.

As indicative of the activity unique to the administrative section, the following time line of administrative activity and concerns is included. This listing excludes the routine duties of monthly and quarterly report writing, fiscal accounting, and general management of activities.

June, 1976

Hiring of professional staff completed (Research Associate, Counselors (3), Administrative Assistants (2)) after interviews with 62 persons.

Site location search still going on, site is operational in temporary location, 144 West 125th Street.

July, 1976

Negotiations for site are complete, the NYRDS will stay on the 144 location.

Orders and specifications for repair and structural work are completed.

Conduction of in-house training is on-going.

Director attends CORRC meeting in Denver, Colorado.

August, 1976

Lease arrangements not yet final.

Renovations are in progress.

Telephone installation will not be finished until September work is beginning on prototype divestories

- . Cooperating Agencies
- . Transportation Organizations
- . Summer Recreation Resources (for 1977)

Director attends CORRC meeting in Denver, Colorado.

NYRDS reporting format is finalized.

September, 1976

NYRDS Director and Research Associate attend RDS meeting in San Francisco.

Service Directory is revised and updated (#1)

2 staff members attend Medicaid workshop to gain capability in Medicaid forms and procedures.

In-service training to staff in Intake Procedures and Client reception procedures.

NYRDS begins client library of service brochures, information, and other reading materials for clients.

October, 1976

Lease for 144 site is finalized.
Renovations, alterations scheduled for November.
2 staff members represent NYRDS at annual conference of AAMD.
Administration enters into negotiations with N.Y. University to provide dental services to handicapped youth in area.

November, 1976

Weekly staff meeting format is finalized.
Research Associate conducts in-service training in data processing to entire staff (as pertains to NYRDS efforts).
Counselor asked to participate in six-week training session on "Needs of L.D. Children" by St. Vincent's Hospital .
Counselor attends workshop on "Evaluating Health Treatment by using Health Status Index", Harlem Hospital.
Counselor attends Citizen's Council for the Community of Retarded (CCCR) conference at Fordham University.
2 Staff members attend Committee on the Handicapped Workshops, Purchase N.Y., joint sponsor NYSED and RRC.

December, 1976

Director, and 2 staff, participate in R.R.C. sponsored conference "Assessment Without Bias", Rochester, New York.
Negotiations still going on concerning alterations to 144 site.

January, 1977

Telephone company has given NYRDS the same telephone number as the Internal Revenue Service Security Information office.
NYRDS staff (2) attend two R.R.C. sponsored workshops.
Lois Sharpe, Director of R.D.S., Hartford, Connecticut visits New York center.
NYRDS sends letters to all PTA presidents in School Districts 4,5,6, (in catchment area).
4 Health Screenings (preschool children) take place (arranged by NYRDS).

February, 1977

Negotiations completed and NYRDS received the annual educational statistics from NYCBOE, Office of Educational Statistics.
Service Directory is revised and updated (#2)

NYRDS produces booklet; Helping the Very Young Child Learn to Speak Distinctly.

2 Health Screenings (pre-school children) take place (arranged by NYRDS).

2 Staff members become participants in 2 days per week (6 weeks) consumer advocacy health workshops sponsored by New Human Services Institute, CUNY.

March 1977

2 staff members assist RRC in "Child Find Workshops", New York City.

NYRDS now logging 50 calls per day from people wanting to report someone for "cheating on taxes".

Completed printing of "Summer Camp Directory".

April, 1977

Site visit by Dr. N.D. Howe, Program Officer, BEH, USOE, DHEW.

300 Summer Camp Directories distributed.

NYRDS develops specific plan of approach to NYCBOE services.

Summer workshop topics decided upon and contact of agencies (for referral of parents to attend), begins.

NYRDS develops advertisements of service to be placed in local newspaper (English, Spanish, and Chinese).

May, 1977

Advertisements appear in newspapers.

Public service announcements sent to four local radio stations.

Mr. Philip Deppe assigned to NYRDS to provide administrative assistance and depth to the forthcoming approach to collaboration with the N.Y.C.B.O.E. structures.

Staff member attends "Translating Rights into Realities" conference.

June, 1977

- Staff in-house training to increase skills associated with the use and interpretation of psychometric tools used by the NYCBOE.
- Planning continues for the parent workshops in July, over 20 agencies have been contacted.
- Meetings continue with NYCBOE units to determine areas of collaboration.
- Open House for NYRDS agency and advisory representatives is held.

- Advertisement copy is distributed to Housing Board newsletters (distributorship of over 9,000 households in catchment area).

July, 1977

- First cases received from NYCBOE Evaluation Units as test of NYRDS production.
- Staff instructed to begin organizing files and materials for close-out procedures in August.
- Intensive effort to complete NYRDS process with new clients.

August, 1977

- Staff begin to take annual leave.
- Finish case load referred by NYCBOE - 100% contact and 100% service provision.
- Begin close-out procedures, caseloads and statistical information.

This component, during the operational period reported here consumed 7,110 staff hours of effort, or 24% of the total effort. Overall the entire project reported, since it's inception accounted for 29,054 hours of staff effort with 2,275 person hours being devoted to start-up activities.

During the operational period there were 13,956 service actions recorded, (from telephone calls to site visits to agencies and client homes) and the operational cost per hour total was $14.38 (including 30% university overhead on salary) overall, or $10.80 in direct cost per operational hour. The following "Summary of Personnel and Time Allocation" renders the Component percentage, and total hours, for each month recorded.

New York Regional Direction Service
Summary of Personnel & Time Allocation
February 1976 - September 1977

	Agency/Service Info.		Client Serv./Info.		Advisory		Outreach		Admin.		
	%	I	%	II	%	III	%	IV	%	V	TOTAL HRS.
* February * March * April	(During February, March, April, 1976, New York Regional Direction Service expended 2,275 person hours in carrying out its mission. This involved the equivalent of 5 people working and 65 workdays.)										2,275
May	10	364	10	364	20	728	40	1456	20	728	3,640
	(During May, 1976, New York Regional Direction Service expended 3,640 person hours in carrying out its mission. This involved 9 people working and 65 workdays.)										
June	10	364	10	364	20	728	40	1456	20	728	3,640
	(During June, 1976, New York Regional Direction Service expended 3,640 person hours in carrying out its mission. This involved 9 people working and 65 working days.)										
July	10	364	10	364	20	728	40	1456	20	728	3,640
	(During July, 1976, New York Regional Direction Service expended 3,640 person hours in carrying out its mission. This involved 9 people working and 65 workdays.)										
August	10	174.2	10	174.2	20	348.4	40	696.8	20	348.4	1,742
	(During August, 1976, New York Regional Direction Service expended 1,742 person hours in carrying out its mission. This involved 11.3 people working and 22 workdays.)										
September	20	356.4	5	89.1	35	623.7	20	356.4	20	356.4	1,782
	(During September, 1976, New York Regional Direction Service expended 1,782 person hours in carrying out its mission. This involved 11½ people working and 22 workdays.)										
October	25	440.0	9	158.4	28	492.8	25	440.	13	228.8	1,760
	(During October, 1976, New York Regional Direction Service expended 1,760 person hours in carrying out its mission. This involved 12½ people working and 20 workdays.)										

(Summary of Personnel & Time Allocation cont.)

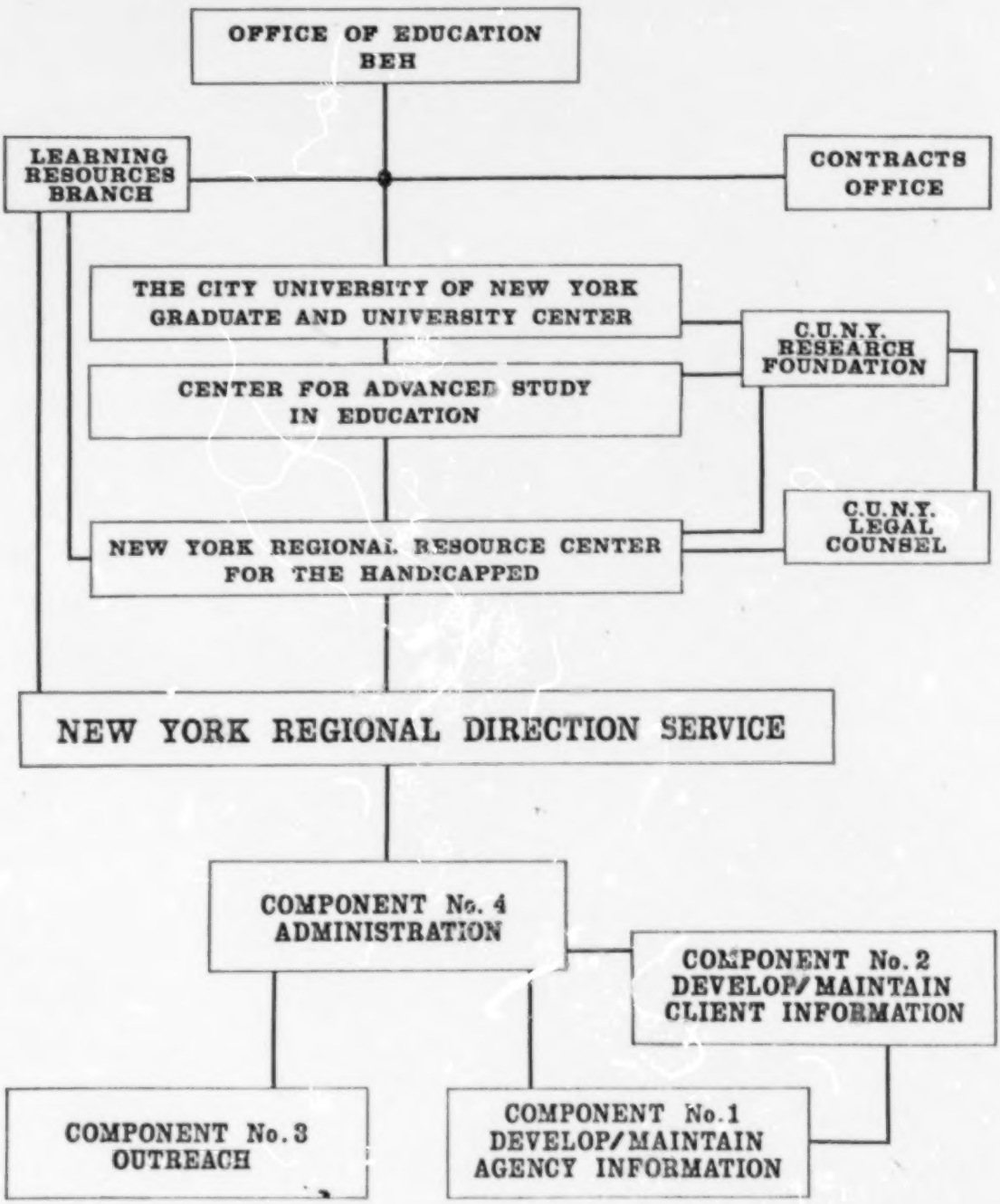
	Agency/Service Info.		Client Serv./Info.		Advisory		Outreach		Admin.		
	%	I	%	II	%	III	%	IV	%	V	TOTAL HRS.
November	10	170	15	255	30	510	30	510	15	225	1,708
	(During November, 1976, New York Regional Direction Service expended 1,708 person hours in carrying out its mission. This involved 15 people working and 18 workdays.)										
December	20	382	25	477	30	573	20	382	5	95	1,911
	(During December, 1976, New York Regional Direction Service expended 1,911 person hours in carrying out its mission. This involved 13 people working and 21 workdays.)										
January	20	404	35	705	15	302	20	404	10	201	2,016
	(During January, 1977, New York Regional Direction Service expended 2,016 person hours in carrying out its mission. This involved 17 people working and 21 workdays.)										
February	16	273.6	30	513	4	68.4	10	171	40	684	1,710
	(During February, 1977, New York Regional Direction Service expended 1,710 person hours in carrying out its mission. This involved 14 people working and 18 workdays.)										
March	26	146	28	159.5	7	40.5	5	25.5	34	190.5	2,024
	(During March, 1977, New York Regional Direction Service expended 2,024 person hours in carrying out its mission. This involved 13 people working and 23 workdays.)										
April	17	314.16	28	517.44	1	18.48	11	203.28	43	794.64	1,848
	(During April, 1977, New York Regional Direction Service expended 1,848 person hours in carrying out its mission. This involved 13 people working and 23 workdays.)										
May	19	357	26	489	2	38	17	319	36	676	1,859
	(During May, 1977, New York Regional Direction Service expended 1,859 person hours in carrying out its mission. This involved 16 people working and 21 workdays.)										

(Summary of Personnel & Time Allocation cont.)

	Agency/Service Info.		Client Serv./Info.		Advisory		Outreach		Admin.		
	%	I	%	II	%	III	%	IV	%	V	TOTAL HRS.
June	19	395.78	21	437.45	2	41.66	22	458.3	36	750	2,083.1
	(During June, 1977, New York Regional Direction Service expended 2,083.1 person hours carrying out its mission. This involved 17 people working and 22 workdays.)										
July	21	629.6	37	1109.3	1	30	9	269.8	32	959.4	2,968
	(During July, 1977, New York Regional Direction Service expended 2,968 person hours in carrying out its mission. This involved 17 people working and 20 workdays.)										
August	18	380.16	23	485.76	14	295.68	19	401.28	25	528	2,112
	(During August, 1977, New York Regional Direction Service expended 2,112 person hours carrying out its mission. This involved 15 people working and 23 workdays.)										
September	18	248.22	23	317.17	14	193.06	19	262.01	25	344.75	1,379
	(During September, 1977, New York Regional Direction Service expended 1,379 person hours carrying out its mission. This involved 12 people working and 21 workdays.)										
TOTAL	17	5,035.12	22	6,251.02	15	4,303.18	22	6,355.07	24	7,109.81	29,054.18

*Includes start-up time
Not shown in 1st total

ADMINISTRATIVE RELATIONSHIPS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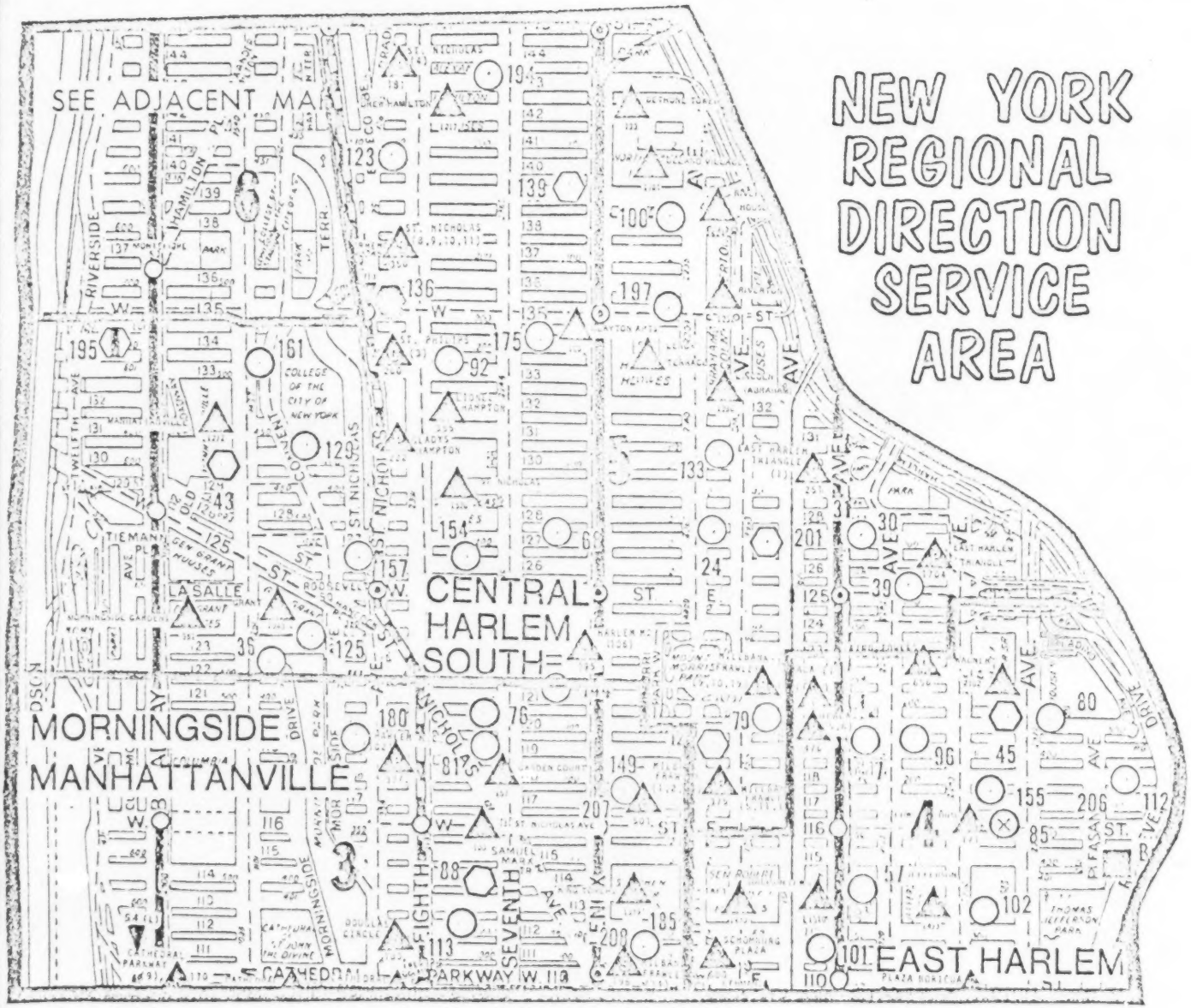
NEW YORK REGIONAL RESOURCE CENTER FOR THE HANDICAPPED
NEW YORK REGIONAL DIRECTION SERVICE
COMPONENT No. 4 ADMINISTRATION
COMPONENT No. 2 DEVELOP/MAINTAIN CLIENT INFORMATION
COMPONENT No. 3 OUTREACH
COMPONENT No. 1 DEVELOP/MAINTAIN AGENCY INFORMATION


NEW YORK REGIONAL DIRECTION SERVICE AREA
SEE ADJACENT MAP
CENTRAL HARLEM SOUTH
MORNINGSIDE MANHATTANVILLE
EAST HARLEM
COLLEGE OF THE CITY OF NEW YORK
CATHEDRAL PARKWAY W. 110
PARKWAY W. 113
RIVERSIDE DRIVE
MORNINGSIDE DRIVE
EIGHTH AVE
SEVENTH AVE
LENOX AVE
PARK AVE
PLEASANT AVE
THOMAS JEFFERSON PARK